Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury Internal Revenue Sarvice

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

		lendar year 2017 or tax year beginning			, 2017	, and end				
١	lame i	of foundation						A Employer identifi	cation number	
THE LEVITON FOUNDATION, INC NEW Number and street (or P O box number if mail is not delivered				/ YORK				11-6006368		
				I to street address) Roo		Room/suit	e	B Telephone number	er (see instructions)	
							Ì			
	201	NORTH SERVICE ROAD						(631) 81	2-6000	
_	City or	town, state or province, country, and ZIP or foreign pos	tal code							
								C If exemption applica pending, check here	tion is	
	MEL	VILLE, NY 11747					· ·	periang, anominor		
G	Che	ck all that apply Initial return		Initial return	of a former p	ublic cha	rity	D 1 Foreign organizat	ons check here	
		Final return		Amended re	turn .		1	2 Foreign organiza		
		Address change		Name chang	е			85% test, check h	ere and attach	
H	Che	ck type of organization X Section 501(c)(3) ex	empt private f	oundation			•		
Γ	ີ s	ection 4947(a)(1) nonexempt charitable trust	Ot	her taxable pr	ıvate founda	tion 🕢	W	E If private foundation	(1)(A), check here	
ī				nethod X C		rual	;	-	in a 60-month termination	
	end	 	ther (sp				- [[(1)(B), check here	
				d) must be on ca	ish basis)					
E	art	Analysis of Revenue and Expenses (The		levenue and					(d) Disbursements	
_		total of amounts in columns (b), (c), and (d)		enses per	(b) Net inve		(c) Adjusted net income	for charitable purposes	
		may not necessarily equal the amounts in column (a) (see instructions))		books	incon	ie		IIICOIIIO	(cash basis only)	
	1	Contributions, gifts grants etc., received (attach schedule) .		1,100,000.						
	2	Check If the foundation is not required to attach Sch B.		-						
œ	3	Interest on savings and temporary cash investments.			1		-			
201R	4	Dividends and interest from securities								
~		Gross rents								
, 	ь	Net rental income or (loss)					-			
<u>e</u>		Net gain or (loss) from sale of assets not on line 10								
3		Gross sales price for all assets on line 6a								
Š	7	Capital gain net income (from Part IV, line 2) .				0.				
" " " " Revênű	8	Net short-term capital gain								
ŕ	9	Income modifications								
	10 a	Gross sales less returns and allowances								
35	b	Less Cost of goods sold .								
ő	с	Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule)							<u></u>	
_	12	Total. Add lines 1 through 11	1	,100,000.		0.				
	13	Compensation of officers, directors, trustees, etc.		0.						
ses	14	Other employee salaries and wages								
pens	15	Pension plans, employee benefits								
Exp	16a	Legal fees attach schedule) 5 .2018								
Ш	b	Accounting lees (attach schedule)					_			
₹.	С	Other professional fees (attach schedule)					<u> </u>			
цa	17	Interest QQDEN, UT								
ij	18	Taxes (attach schedule) (see instructions)								
Administrative	19	Depreciation (attach schedule) and depletion.					Ļ		ļ	
₫	20	Occupancy								
ğ	21 22	Travel, conferences, and meetings					<u> </u>		ļ	
a	22	Printing and publications		20.4			<u> </u>			
į	23	Other expenses (attach schedule) ATCH .1.	<u> </u>	384.			<u> </u>		384	
rati	23 24 25	$\label{total operating and administrative expenses.}$		204					304	
pe		Add lines 13 through 23	<u> </u>	384.			<u> </u>		384	
0		Contributions, gifts, grants paid		419,141.	 		<u> </u>		419,141	
_	26	Total expenses and disbursements Add lines 24 and 25	<u> </u>	419,525.	<u> </u>	0.	├	0.	419,525	
	27	Subtract line 26 from line 12		600 475]			
	a	Excess of revenue over expenses and disbursements		680,475.		0.	 		 	
	b	Net investment income (if negative, enter -0-)	<u> </u>				 	 -	 	
_	C	Adjusted net income (if negative, enter -0-)			l				<u> </u>	

JSA For Paperwork Reduction Act Notice, see instructions. 7E1410 1 000 0750KO F332

Fo	rm 990)-PF (2 <u>0</u> 17)	THE LEVITON FOUNDATION	THE LEVITON FOUNDATION, INC NEW YORK		-6006368 Page 2
Part II Balance Sheets		Deleges Objects	Attached schedules and amounts in the	Beginning of year	End	of year
ř	art II	Balance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing	67,086.	747,561.	747,561.
	2		cash investments		,	
	3	Accounts receivable ▶	1		 	
		•	btful accounts ▶			
	4					
			btful accounts ▶			
	5					
	6		officers, directors, trustees, and other			
	•		tach schedule) (see instructions)			
	7		T ^{**}			
	7		receivable (attach schedule)			
s			btful accounts ▶		 	
Assets	8		se			
SS	9	•	leferred charges			
٩	10 a		e government obligations (attach schedule)			
	þ	Investments - corporate	e stock (attach schedule)			
ı		Investments - corporate	bonds (attach schedule)			
	11	Investments - land, building and equipment basis				
1		Less accumulated depreca (attach schedule)	ation >			
	12		loans			
	13	Investments - other (atta	ach schedule)			
	14	Land, buildings and equipment basis	>			
		Less accumulated deprecia (attach schedule)				
	15	Other assets (describe	,			
	16	•	completed by all filers - see the			
		•	page 1, item i)	67,086.	747,561.	747,561.
_	17		accrued expenses			
	18	• •				
S		· •				
ŧ.	19		• • • • • • • • • • • • • • • • • • • •			ĺ
Liabilities	20	·	ors, trustees, and other disqualified persons, .			
ē.	21		otes payable (attach schedule)			
	22	Other liabilities (describe	•▶)			
		Takal Makalaka / add laa	47 (1	0.	0.	
_	23	Total Habilities (add line	es 17 through 22)			
S		Foundations that follow	w SFAS 117, check here			
ances		•	through 26, and lines 30 and 31.			
an	24	Unrestricted				
3al	25	Temporarily restricted				
p	26					
S			ot follow SFAS 117, check here ▶ X			
ī		and complete lines 27	through 31.	ĺ		
0	25 26 27 28 29 30 31	Capital stock, trust prin	cipal, or current funds	254,387.	254,387.]
ets	28	Paid-in or capital surplus, or	r land, bldg , and equipment fund			
55	29	Retained earnings, accumi	ulated income, endowment, or other funds	-187,301.	493,174.	
t A	30	Total net assets or fund	d balances (see instructions)	67,086.	747,561.	
Š	31	Total liabilities and	i -			1
		instructions)		67,086.	747,561.	
Р	art l		nges in Net Assets or Fund Balar	ices		
_			palances at beginning of year - Part I		ust agree with	
			ed on prior year's return)			67,086.
2			, line 27a			680,475.
3			1 1 1 6/1 15			
						747,561.
5		creases not included in			5	<u> </u>
			palances at end of year (line 4 minus	line 5) - Part II, column (b)		747,561.
<u> </u>			Total Control of Military		, <u> </u>	Form 990-PF (2017)

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Form	990-PF (2017)					Page 3
Par	t IV Capital Gains	and Losses for Tax on Inve	estment Income			
		scribe the kind(s) of property sold (for e	•	(b) How acquired P - Purchase	(c) Date acquired (mo_day, yr)	(d) Date sold (mo , day, yr)
_	2-story b	rick warehouse, or common stock, 200	sns MLC Co)	D - Donation	(iiio , day, yi)	
<u>1 a</u>						
<u>b</u>				 -	 	
<u>c</u>						
<u>u</u>			-	 		
	(.) 0	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	ss)
	(e) Gross sales price	(or allowable)	plus expense of sale		((e) plus (f) mini	us (g))
a						
<u>b</u>						
c		 		ļ		
d	- 					
<u>е</u>	Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69			
	Complete only for assets s	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) ga (k), but not less to	
(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
a						
b						
С						
<u>d</u>						
e						
2	Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7			
	_	(If (16	oss), enter -0- in Part I, line 7	2		
3		pain or (loss) as defined in sections Part I, line 8, column (c). See ins				
	. •	· · · · · · · · · · · · · · · · · · ·	· ' '	3		
Par			duced Tax on Net Investment I			
_			e section 4940(a) tax on net investi		me)	
,					,	
If se	ction 4940(d)(2) applies,	leave this part blank				
						_
			outable amount of any year in the b	ase perio	d?	Yes X No
If "Y		n't qualify under section 4940(e)		·····		
1_	(a)		ar, see the instructions before maki	ng any er	ntries (d)	.
6 -1-	Base period years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	ļ	Distribution ra	
Cale	endar year (or tax year beginning in)	405,300.	46,880.		(col (b) divided by	8.645478
	2015	610,525.	30,037.			0.325765
	2014	642,195.	27,141.	<u> </u>		3.661435
	2013	468,675.	57,523.	·		8.147611
	2012	56,450.	22,956.			2.459052
						
2	Total of line 1, column ((d)		2	6	3.239341
3	•	io for the 5-year base period - divid		1		
	the number of years the	foundation has been in existence	ıf less than 5 years	3	1	2.647868
						202 205
4	Enter the net value of n	oncharitable-use assets for 2017 f	rom Part X, line 5	4		203,385.
_				_	2	572,387.
5	Multiply line 4 by line 3		• • • • • • • • • • • • • • • • • • • •	5		3,2,307.
e	Enter 10/ of not invest-	pont income (194 of Bod I line 275)		6		
6	Enter 170 OF Het INVESTI	nent income (1% of Part I, line 27b)	• • • • • • • • • • • • • • • • • • • •	 		
7	Add lines 5 and 6			7	2,	572,387.
8		tions from Part XII, line 4		8		419,525.
		greater than line 7, check the box	in Part VI, line 1b, and complete	that par	t using a 1% ta	x rate. See the
_	Part VI instructions					

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see it	nstru	ction	<u>s)</u>	
1a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)				
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.	
	here X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				
3	Add lines 1 and 2			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0.	
6	Credits/Payments				
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a				
b	Exempt foreign organizations - tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868).				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d	_		0.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			0.	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11				
Par	t VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No	
	participate or intervene in any political campaign?	1a		X	
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	instructions for the definition	1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
C	Did the foundation file Form 1120-POL for this year?	1c		X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	l		,	
	(1) On the foundation ▶ \$ 0. (2) On foundation managers ▶ \$ 0.				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	l			
	on foundation managers \$0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X	
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			v	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u> </u>	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a			
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		_ ^ _	
_	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	6	х		
-	conflict with the state law remain in the governing instrument?	7	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	- '			
вa	Enter the states to which the foundation reports or with which it is registered. See instructions NY,				
_	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
þ	·	8ь	х		
9	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	55			
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017, or the tax year beginning in 20172. See the instructions for Part XIV. If "Yes."				_
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV	9		х	4
40		<u> </u>			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		х	
	names and addresses		n_PF		

Part VII-A Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			No
meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			ļ
person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
Website address ▶ N/A			
14 The books are in care of ► MARK BAYDARIAN Telephone no ► 631-812-6	6000)	
Located at ▶210 NORTH SERVICE ROAD MELVILLE, NY ZIP+4 ▶ 11747			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		🕨	· 🔲
and enter the amount of tax-exempt interest received or accrued during the year	N/A		
16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority_		Yes	No
over a bank, securities, or other financial account in a foreign country?	16		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
the foreign country >			
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year, did the foundation (either directly or indirectly)			'
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	13,	· ,	4
disqualified person? Yes X No	*	7	1 1/2
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	·~		100
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	C.4.	\$ %	* 6
(5) Transfer any income or assets to a disqualified person (or make any of either available for	riji riti Mari	**************************************	
the benefit or use of a disqualified person)?			1
(6) Agree to pay money or property to a government official? (Exception, Check "No" if the			1
foundation agreed to make a grant to or to employ the official for a period after	W .), <i>i</i>	
termination of government service, if terminating within 90 days)	**		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	_ <u></u>	<u> </u>	ليسا
The state of the s	1b		X
The state of the s	* (. h. ~.	9' / '.'
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	4 -	٠	X
	1c		_^
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		!	1
operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?			
6e, Part XIII) for tax year(s) beginning before 2017?	!		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			l
	2b	N/	A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
the provisions of section 4342(a)(2) are being applied to any of the years listed in 2a, list the years here	ĺ		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1
at any time during the year?			1
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			1
disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	!		1
Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	3b	N/	A
	4a	/	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	4b		X

Par	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)_			
5a	During the	e year, did the foundation pay or incur any amo	unt to				Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influe	nce legislation (section	n 4945(e))?	, 🔲 Yes 🔀 No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
	•	ly or indirectly, any voter registration drive?				ł	1	
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No							
	(4) Provide a grant to an organization other than a charitable, etc., organization described in							
		in 4945(d)(4)(A)? See instructions						
		le for any purpose other than religious, ch			,	ł	1	
		ses, or for the prevention of cruelty to children				- }	1	
ь		•			. — — —		-	!
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions							x	
	-	ions relying on a current notice regarding disas	-			┌┐┝╩	 	
	•		•			└	1	
С		swer is "Yes" to question 5a(4), does the	_	•		- 1		
		t maintained expenditure responsibility for the g		• • • • • • • • • • • • • • • • • • • •	. X Yes No		-	
_		ittach the statement required by Regulations se				1	1	
6a		oundation, during the year, receive any fun			1 1 11			
		onal benefit contract?			Yes X No		1	V
b		undation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contra	ct?	6b	 -	X
_		6b, file Form 8870			<u>г</u> . га	ł	}	
7a	-	e during the tax year, was the foundation a pa	•			1	N/	<u>k</u>
b		lid the foundation receive any proceeds or have				7b		<u> </u>
Pai	t VIII	Information About Officers, Director and Contractors	s, Trustees, Fou	ndadon wanagers	s, mignily raid cimp	loyees,		
1	List all of	ficers, directors, trustees, foundation n						
		(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Exper	ise acco	unt,
			devoted to position	enter -0-)	and deferred compensation	Other t		
ATC	<u> </u>			0.1	0.			0.
AIC.			<u> </u>					
			}	}				
								
			ļ					
								
			1	1	}			
2	Compone	ation of five highest-paid employees	(athor than thos	a included on line	1 con instruction	\nc\ 16		antar
2	"NONE."	ation of five nighest-paid employees	(other than thos	e included on line	e i - see instructio	2115). II I	ione,	enter
			(b) Title, and average		(d) Contributions to	(a) F		
(a)	Name and a	ddress of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Exper	illowance	es es
					compensation			
	NONE							
	NONE		 					
			l l	ľ				
								
				İ				
				ļ				
			L <u>1</u>					
Total	number c	of other employees paid over \$50,000	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> ▶</u> │			
						Form 99	90-PF	(2017)

Dan	_	1
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Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	206,482.
С	Fair market value of all other assets (see instructions),	1c	·
d	Total (add lines 1a, b, and c)	1d	206,482.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	206,482.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	3,097.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	203,385.
6	Minimum investment return. Enter 5% of line 5	6	10,169.
Pa	Tt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndations	
1	Minimum investment return from Part X, line 6	1	10,169.
-	Tax on investment income for 2017 from Part VI, line 5 2a		<u> </u>
b	Income tax for 2017 (This does not include the tax from Part VI). 2b	-	
c		2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	10,169.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	10,169.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
·	line 1	7	10,169.
Pa	rt XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	419,525.
b	·	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	419,525.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-	317,323.
J		5	0.
c	Enter 1% of Part I, line 27b See instructions	5	419,525.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	ilculating wi	nether the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

Page 9

Pa	rt XIII Undistributed Income (see instru	ictions)			- Fage 9
	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
·	line 7				10,169.
2	Undistributed income, if any, as of the end of 2017				
a	Enter amount for 2016 only				
t	Total for prior years 20 15 ,20 14 ,20 13				
	Excess distributions carryover, if any, to 2017				
а	From 2012				
t	From 2013 _ = = = = = = = = = = = = = = = = = =	Ì	Ì		
c	From 2014 640,838.	İ			
c	From 2015 609,023.		Ì		
e	From 2016	İ			
f	Total of lines 3a through e	2,175,066.			
4	Qualifying distributions for 2017 from Part XII, line 4 > \$ 419,525.				
a	Applied to 2016, but not more than line 2a				
t	Applied to undistributed income of prior years (Election required - see instructions)				
c	: Treated as distributions out of corpus (Election required - see instructions)				
•	Applied to 2017 distributable amount				10,169.
e	Remaining amount distributed out of corpus	409,356.			
5	Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as indicated below:	2 504 422			
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,584,422.			
t	Prior years' undistributed income Subtract				
c	Inne 4b from line 2b				
c	Subtract line 6c from line 6b Taxable	ļ			
e	amount - see instructions				
	instructions				
f	Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
^	required - see instructions)				
	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	56,450.			
9	Excess distributions carryover to 2018.	2,527,972.			
4-	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	C40 939				
	Excess from 2014				
	Excess from 2015				
	Excess from 2016				1
					Form 990-PF (2017)

Check here ▶ X if the foundation only makes contributions to preselected charitable organizations and does not accept N/A c Any submission deadlines d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other N/A

JSA 7E1490 1 000

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Page **11**

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid During Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	,
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTINUES	
a Paid during the year		İ		
ATCH 4				
	}	1		
	1]	
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]			1
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	1		}	1
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				l e
	<u> </u>	<u> </u>	<u> </u>	410 141
Total	 		▶ 3a	419,141.
b Approved for future payment	1	İ		1
NONE			J	j
	1		([
	1			į.
	N.		4	Į.
]		
			1	
	1		1	1
				}
			İ	
Total			▶ 3b	

JSA 7E1491 1 000

Part	XVI-A Analysis of Income-Prod	ucing Act	vities			
	gross amounts unless otherwise indicated	Unrela (a)	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt
1 Pro	ogram service revenue	Business code	Amount	Exclusion code	Amount	function income (See instructions)
а						
b			<u> </u>	ļ		
c		ļ	<u> </u>			
d		<u> </u>		 		
e			<u></u>	 	 	
f		ļ		ļ		
-	Fees and contracts from government agencies					
	embership dues and assessments			 		·
	erest on savings and temporary cash investments •		 	 		
	vidends and interest from securities	} -	 			
	et rental income or (loss) from real estate		 	 		
	Debt-financed property			 		
	Not debt-financed property			 		
	t rental income or (loss) from personal property			 		
	her investment income			 		
	in or (loss) from sales of assets other than inventory		 			
	et income or (loss) from special events · · · · · · · · · · · · · · · · · · ·					
	her revenue a					
b				†		
c				<u> </u>		
d						
e				,		
12 Su	ubtotal Add columns (b), (d), and (e)					
	etal, Add line 12, columns (b), (d), and (e)				13	
	worksheet in line 13 instructions to verify calc	ulations)				
Part	XVI-B Relationship of Activitie	s to the A	ccomplishment of Ex	kempt Pur	poses	
Line	Explain bolow now cook down	-				
					_ 	
						
						
	- 					
			N/A			
						
						
			 			
						
						
	·					
		 				
						
	_ 					- 000 85

Part .	XVII	Information F Exempt Orga		ansfers to and Tran	sactions a	ind Relations	ships With Non	chari	table	1
1 C)id the	organization direc	tly or indirectly	engage in any of the fo	llowing with	any other orga	nization described		Yes	No
ır	n sec			501(c)(3) organization	-	-				
	-		na foundation to	a noncharitable exempt	organization	of				
		•	•		•			1a(1)		х
•	•									Х
•	•	ransactions	,							
ť	1) Sai	es of assets to a no	oncharitable exe	mpt organization				1b(1)		Х
-				able exempt organization.						X
(3) Rer	ntal of facilities, equ	iipment, or othe	rassets				1b(3)	ļ	Х
										X
										X
-				hip or fundraising solicitat					 	X
				sts, other assets, or paid					f	L
				es," complete the follow rices given by the report						
				gement, show in column						
(a) Line	- 1	(b) Amount involved	·	noncharitable exempt organizati			fers, transactions, and sha			
		N/A			N/	A			-	
			<u> </u>				···			
			-							
		·-··	 				 -			
								_		
		·	 	······································						
										-
d	escrib) (other than se	ffiliated with, or related ection 501(c)(3)) or in sec				Y	es X] No
<u> </u>	163,	(a) Name of organization		(b) Type of organiz	ation	<u> </u>	(c) Description of relation	ship		
		<u> </u>		(-,),						
				<u></u>						
Cian				nined this return including accompi taxpayer) is based on all information f						
Sign			ayeur	- 13/29/18		Treasure	, .	S discus		
Here	Sign	ature of efficer or trustee	1	Date	Title		See instruction		Yes	No
		·	<u> </u>							
Paid		Print/Type preparer's n		Preparer o signature	0.	Date	Wiew []	PTIN		
	arer	LAURA KIELCZ		June pick	mier_	03/20/1		P007		.9
Prepa		-		IG U.S. LLP			Firm's EIN ► 34-6	5655	96	
Use (אוווע	Firm's address > 5	-	ARE IY		10036	Phone no 212-7	73_3	000	
		L	EW YORK, N			10020	Phone no 212-7	12-3	000	

Schedule B

(Form 990, 990, EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Name of the organization			Employer identification number				
THE LEVITON FOUNDAT	11, 6006260						
Occasionation type (sheet) on	<u> </u>		11-6006368				
Organization type (check on)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organiza	ation					
	4947(a)(1) nonexempt charitable trust	t not treated as a private fou	undation				
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
•	4947(a)(1) nonexempt charitable trust	t treated as a private founda	tion				
	501(c)(3) taxable private foundation						
Check if your organization is	covered by the General Rule or a Special Rule.						
•	(a), (b), or (10) organization can check boxes for	both the General Rule and a	Special Rule See				
General Rule							
	filing Form 990, 990-EZ, or 990-PF that received property) from any one contributor. Complete ontributions		-				
Special Rules							
regulations under s 13, 16a, or 16b, a	described in section 501(c)(3) filing Form 990 ections 509(a)(1) and 170(b)(1)(A)(vi), that che d that received from any one contributor, during of the amount on (i) Form 990, Part VIII, line 1h	ecked Schedule A (Form 990 g the year, total contributions	or 990-EZ), Part II, line s of the greater of (1)				
contributor, during	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
contributor, during contributions totale during the year for General Rule appl	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
990-EZ, or 990-PF), but it me	isn't covered by the General Rule and/or the S st answer "No" on Part IV, line 2, of its Form 99 o certify that it doesn't meet the filing requireme	90, or check the box on line l	H of its Form 990-EZ or on its				

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 2 Name of organization THE LEVITON FOUNDATION, INC. - NEW YORK Employer identification number 11-6006368 Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution LEVITON MFG. CO., INC. 1 Person Payroll 201 NORTH SERVICE ROAD 1,100,000. Noncash (Complete Part II for MELVILLE, NY 11747 noncash contributions) (a) (b) (c) Total contributions Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (c) (d) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person Payroli Noncash (Complete Part II for noncash contributions) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c)

				_			_
30	:hedul	e B	(Form	990,	990-EZ.	or 990-PF	(2017

Type of contribution

(d)

Type of contribution

Person
Payroll
Noncash
(Complete Part II for noncash contributions.)

Person
Payroll
Noncash
(Complete Part II for noncash contributions)

No.

(a) No. **Total contributions**

(c)

Total contributions

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

Employer identification number 11-6006368

Part II	Noncash Property (see instructions) Use duplicate copies of	Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 _ _	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	

Name of organization THE LEVITON FOUNDATION, INC. - NEW YORK

Employer identification number 11-6006368

(10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the	naritable, etc., contributions to organizations described in section 501(c)(7), (8), or n \$1,000 for the year from any one contributor. Complete columns (a) through (e) and For organizations completing Part III, enter the total of exclusively religious, charitable, etc., or less for the year (Enter this information once. See instructions.) ▶ \$						
(b) Purpose of gift			(d) Description of how gift is held				
	(e) Transf	er of gift					
Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee				
(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
	(e) Transf	er of gift					
Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee				
(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
(e) Transfer of gift							
Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee				
(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
(e) Transfer of gift							
Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
	(10) that total more than \$1,000 for the following line entry. For organizate contributions of \$1,000 or less for the Use duplicate copies of Part III if addit (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift (b) Purpose of gift (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift (b) Purpose of gift	(10) that total more than \$1,000 for the year from any the following line entry. For organizations completing Par contributions of \$1,000 or less for the year (Enter this in Use duplicate copies of Part III if additional space is needs (b) Purpose of gift (c) Use (b) Purpose of gift (c) Use (b) Purpose of gift (c) Use (b) Purpose of gift (c) Use (c) Use (d) Transferee's name, address, and ZIP + 4 (e) Transferee's name, address, and ZIP + 4 (f) Purpose of gift (c) Use (g) Transferee's name, address, and ZIP + 4	(e) Transferee's name, address, and ZIP+4 Transferee's name, address, and ZIP+4 (e) Transfer of gift Transferee's name, address, and ZIP+4 (e) Transfer of gift Transferee's name, address, and ZIP+4 (e) Transfer of gift Transferee's name, address, and ZIP+4 Relation (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP+4 Relation (b) Purpose of gift (c) Use of gift Transferee's name, address, and ZIP+4 Relation (b) Purpose of gift (c) Use of gift (c) Use of gift (d) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP+4 Relation (e) Transfer of gift Transferee's name, address, and ZIP+4 Relation (e) Transfer of gift Transferee's name, address, and ZIP+4 Relation (e) Transfer of gift (f) Use of gift (g) Transfer of gift				

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THE LEVITON FOUNDATION, INC .- NEW YORK

2017 FORM 990-PF

11-6006368

ATTACHMENT 1

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
MISCELLANEOUS	229.			229.
FOUNDATION RETURN POSTING FEE	155.			155.
TOTAL	384.			384.

ATTACHMENT 2

FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME: SUFFOLK COUNTY DETECTIVE INVESTIGATORS P
GRANTEE'S ADDRESS: 868 CHURCH STREET
CITY, STATE & ZIP: BOHEMIA, NY 11716
GRANT DATE: 09/29/2017

GRANT AMOUNT:

600.

GRANT PURPOSE: PROVIDE FUNDING FOR DWI JOURNAL AD

600.

AMOUNT EXPENDED: ANY DIVERSION?

NO

DATES OF REPORTS: 09/29/2017

VERIFICATION DATE:

RESULTS OF VERIFICATION:

TO THE KNOWLEDGE OF THE FOUNDATION, NO PART OF THE GRANT WAS USED FOR ANY PURPOSE OTHER THAN THE INTENDED PURPOSE, AND NO VERIFICATION EFFORTS HAVE BEEN CONSIDERED NECESSARY.

THE LEVITON FOUNDATION, INC. - NEW YORK 2017 FORM 990-PF

11-6006368

FORM 990PF, PART VIII - LIST OF OFFIC	ATTACHMENT 3			
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SHIRLEY LEVITON C/O LEVITON 201 NORTH SERVICE ROAD MELVILLE, NY 11747	TREASURER 1.00	0.	0.	0.
DONALD HENDLER C/O LEVITON 201 NORTH SERVICE ROAD MELVILLE, NY 11747	PRESIDENT 1.00	0.	0.	0.
STEFHEN SOKOLOW C/O LEVITON 201 NORTH SERVICE ROAD MELVILLE, NY 11747	VICE PRESIDENT 1.00	0.	0.	0
MARK BAYDARIAN C/O LEVITON 201 NORTH SERVICE ROAD MELVILLE, NY 11747	SECRETARY 1.00	0.	0.	0.
	GRAND TOTALS	0.	0.	0.

THE LEVITON FOUNDATION, INC - NEW YORK 2017 FORM 990-PF

11-6006368

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

		ATTACHMEN	. 4
RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PUPPOSE OF GRANT OP CONTRIBUTION	AMOUNT
THE HOME DEPOT FOUNDATION 2451 CUMBERLAND PARKWAY, SUITE 3553 ATLANTA, GA 30339	MONE PC	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL PURPOSES	125,000
CYCLE FOF SURVIVAL - MEMORIAL SLOAN KETTEPING P O. BOX 5028 HAGEPSTOWN, MD 2.741-5028	NONE PC	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL PURPOSES	3,000
AMERICAN FRIENDS OF PROMOTORA DE LAS BELLAS ARTES P O BOX 437289 SAN (SIDRO, CA 92143	MONE PC	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL FUPPOSES	15,000
GLOBAL INSTITUTE OF LIU LONG ISLAND UNIVERSITY 700 NORTHERN BLVD BROOKVILLE, NY 11549	NONE PC	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL PURPOSES	25,000
AMERICAN HEAPT ASSOCIATION P O BOX 50075 PRESCOTT, AZ 86304-5975	NONE PC	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL PUPPOSES	20,000
ELECTRICAL SAFETY FOUNDATION INTERNATIONAL 1300 N 17TH ST , SUITE 900 ROSSLII, VA 22209	NORIE PC	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL PUPPOSES	6,500

THE LEVICON FOUNDATION, INC - NEW YORK

2017 FORM 990-PF

11-6006368

FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 4 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PUPPOSE OF GRANT OP CONTRIBUTION	AMOUNT
DEST:NATION 'MAGINATION	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	2,000
ATTN GF DONATION DEPT	PC	PURPOSES	
1111 SOUTH UNION AVENUE			
CHERRY HILL, No 08002			
NASSAU COUNTY MUSEUM OF ART	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	5,900
ONE MUESEUM DRIVE	PC	PUPPOSES	
ROSLYN HARBOR, NY 11576			
PURRSONAL TOUCH ADOPTION, INC	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	650
100 BAKER COUPT	PC	PUPPOSES	
ISLAND PARK, NY 1:558			
UNITED WAY OF LONG ISLAND	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	5,500
819 GRAND BOULEVARD	SC.	PUPPOSES	
DEER PARK, MY 11709			
BIG BROTHERS BIG SISTERS OF LONG ISLAND	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	1,000
70 ACORN LANE	PC	PUPPOSES	
HEVITTOWN, NV 11756			
LEUKEMIA & LYMPHOMA SOCIETY	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	2,000
2550 WASSER TERRACE, SUITE 100	PC	PURPOSES	

HERDON, VA 20171

THE LEVITON FOUNDATION, INC - NEW LORK

2017 FORM 990-PF

11-6006368

FOPM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP	то	SUBSTANTIAL	CONTRIBUTOR

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PUPPOSE OF GRANT OP CONTRIBUTION	AMOUNT
IMCA OF LONG ISLAND	NONE	GRANTS FOR RELIGIOUS. MEDICAL OF EDUCATIONAL	10,000
.21 DOSORIS LANE	PC	PURPOSES	
GLER COVE, NY 11542			
ALZHEIMEP'S FOUNDATION OF AMERICA	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	1,350
322 BTH AVENUE - 7TH FLOOR	PC	PUPPOSES	
NEW TORK, NY 16301			
ACE HARDWARE FOUNDATION	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	25,000
2200 KENSINGTON COUPT	POF	PURPOSES	
OAK BPOCK, IL 60503-0100			
THE JOHN THEISSEN CHILDRENS FOUNDATION	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	2,000
1881 WANTAGH AVENUE	PC	PURPOSES	
WANTAGH, NY 11793			
EACHARY GERALD KNIGHT FOUNDATION, INC	NONE		250
430 RIVENDEUL LANE	PC	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	230
	r.	PUPPOSES	
SEVEPHA PARK, MD 21146			
FIRST TEE OF NEW YORK, INC	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	10,000
3545 JEROME AVENUE	PC	PURPOSES	
BRONA, NY 10467			

THE LEVITON FOUNDATION, INC - NEW YORK

2017 FORM 990-PF

11-6006368

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP	то	SUBSTANTIAL	CONTRIBUTOR

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	•		
MELVILLE FIRE DEPARTMENT	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	500
531 SWEET HOLLOW ROAD	PC	PURPOSES	
MELVILLE, NY 11747			
HELTON TOWNSHIP INCORPORATE	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	2,000
209 OLD HELTON SCHOOL RGAD	PC	FURPOSES	
LANSING, NC 20643			
MARCH OF DIMES	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	3,000
325 CROSSWAY PARK DPIVE	PC	PURPOSES	
WOODBURY, NY 11797			
SUFFOLK COUNTY DETECTIVE INVESTIGATORS PBA	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	€00
8-8 (HURCH STREET	NC	PURPOSES	600
	٩0	PORPOSES	
BOHEMIA, NY 11716			
HOUSTON FOOD BANK	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	7,447
535 PORTWALL STREET	PC	PURPOSES	
HOUSTON, TY 77029			
THE NUCKOLLS FUND	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	500
12 MILL POND ROAD	PC	PURPOSES	
PUTNAM VALLEY, NY 10579			

THE LEVITON FOUNDATION, INC - NEW YORK

2017 FORM 990-PF

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

11-6006368

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AND		
FOUNDATION STATUS OF RECIPIENT	PUPPOSE OF GRANT OP CONTRIBUTION	AMOU
NONE	CONTROL DOD DELICIOUS MEDICAL ON PONGARTANA	

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PUPPOSE OF GRANT OF CONTRIBUTION	AMOUNT
ADELPHI BREAST CANCER	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	5,000
' SOUTH AVE	PC	PURPOSES	
P 0 BOX 701			
GARDEN CITY NY, NY 11530			
CONVOY OF HOPE	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	1,000
330 S PATTEPSON AVENUE	PC	PUPPOSES	
SPRINGFIELD, MO 65902			
"HE SALVATION ARM! OF HIGH COUNTRY	NODE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	500
136 FURMAN ROAD, JUITES 3 6 4	PC	PUPPOSES	
9 0 BCX 1568		141.1600	
BOONE, NC 28607			
FREETON HIGH SCHOOL	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	500
511 INDEPENDENCE BOULEVAPO	PC	PURPOSES	
MORGANTON, NC 28655			
FAMINGDALE COLLEGE FOUNCATION	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	500
2350 BROADHOLLOW ROAD	PC	PURPOSES	300
HORTON HALL ROOM 120		100000	
FARMINGDALE, NY 11735			
ASHE OUTREACH MINISTRIES, INC	NC	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	1,000
7 O BOX 157	PC	PURPOSES	
CRESTON, NC 28615			

THE LEVITON FOUNDATION, INC - NEW YORK 2017 FORM 990-PF

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FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP	то	SUBSTANTIAL	CONTRIBUTOR
		AND	

AND				
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PUPPOSE OF GRANT OP CONTRIBUTION	AMOUNT	
THE NAED EDUCATION & RESEARCH FOUNDATION	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	10,000	
P O BOX 843703	PC	FURPOSES		
KANSAS CITY, MO 64164				
PEDWOOD CREDIT UNION COMMUNITY FUND	HONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	344	
3033 CLEVELAND AVENUE, NO 100	PC	PURPOSES		
SANTA ROSA, CA 95403				
WITHROP UNIVERSITY MOSPITAL ASSOCIATION	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	5,000	
259 FIRST STREET	PC	PURPOSES		
MINEOLA, NY 11501		/		
COMMUNITY FOOD BANK OF NEW JERSE!, INC	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	5,000	
31 EVANS "EPMINAL RCAD	PC	PURPOSES		
H1L_91DE, No 07205				
OVERLOOK FOUNDATION	NONE	GRANTS FOR RELIGIOUS, MEDICAL OP EDUCATIONAL	5,000	
P 0 BOX 220	PC	PURPOSES		
SUMMIT, NJ 07902				
PLANNED PARENTHOOLD AFFILIATES OF NEW JERSEY	NONE	GRANTS FOR RELIGIOUS, MEDICAL OP EDUCATIONAL	5,000	
106 SPEEDWELL AVENUE	PC	PURPOSES		
MORRISTOWN, NJ 37960				

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PURPOSES

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAP

ATTACHMENT 4 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOP AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OP CONTRIBUTION	AMOUNT
CURE PSF 30 EAST PADONIA ROAD- SUITE CUI TIMONIUM, MD 21093	NONE PC	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL PURPOSES	5,000
NORTH SHORE ANIMAL LEAGUE P O BOY 1242 PORT WASHINGTON, NY 11050-7242	NONE PC	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL PURPOSES	3,500
EASTERN MICHIGAN UNIVERSITY FOUNDATION 300 WEST MICHIGAN AVENUE-SUITE 473 YPSILANT , MI 48197	NONE PC	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL PURPOSES	11,500
MASSACHUSETTS INSTITUTE OF TECHNOLOGY SLOAN 77 MASSACHUSETTS AVENUE (E-6J-290) CAMBPIDGE, MA 62139-4307	NONE PC	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL PURPOSES	10,000
UNIVERSITY OF MIAMI SCHOOL OF BUSINESS F O BCX 248032 CORAL GABLES, FL 33124-b520	NONE PC	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL PURPOSES	5,000
THE INN	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	500

211 FULTON AVENUE

HEMPSTEAD, N: 11550

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FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 4 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PUPPOSE OF GRANT OP CONTRIBUTION	AMOUNT
LONG ISLAND CADDIE SCHOLAPSHIP FUND	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	1,000
114 OLD COUNTRY ROAD	PC	PURPOSES	
MINEOLA, NY 1150			
AMERICARES	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	5,000
88 HAMILTON AVENUE	PC	PURPOSES	-,
STAMFORD, CT 06902			
CITYMEALS ON WHEELS	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	5,000
355 LEXINGTON AVENUE	PC	PURPOSES	
NEW :ORK, NY 10317			
COALITION FOR THE POMELESS	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	2,500
129 FULTON STREET	PC	PURPOSES	
NEW :ORA, NY 10038			
DOCTORS WITHOUT BOPDERS	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	5,500
333 7TH AVENUE-2ND FLOOR	PC	PURPOSES	
NEW YORK, NY 10001-5004			
FRANKLIN & MARSHALL COLLEGE	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	5,000
P O BOX 3003	PC	PURPOSES	

LANCASTER, PA 17604-9997

THE LEVITON FOUNDATION, INC - NEW YORK

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FORM 990RF, PART XV - GRAPTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 4 (CONT'D)

	ORIANIANAMIA NA CIRANIANA ACIMPARAMIA		
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
DESCRIPTION AND ADDRESS		PUPPOSE OF GRANT OP CONTRIBUTION	AMOUNT
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	POPPOSE OF GROWN OF CONTRIBUTION	AFOONT
LONG 19LAND CARES THE HARPY CHAPIN FOOD BANK	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	10,000
10 DAVIDS DRIVE-HARRY CHAPIN WAY	PC	PURPOSES	
HAUPPAUGE, Nr 11786-2039			
METROPOLITAN GOLF ASSOCIATION FOUNDATION (MGA)	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	3,000
49 KNOLLWOOD ROAD	PC	PURPOSES	
ELMSFORD, NY 10523			
NORTHWELL HEALTH FOUNDATION	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	25,000
2005 MARCUS AVENUE	PC	PUPPOSES	
NEW HYDE PARY, NY 11042			
THE FIRST TEE OF LONG ISLAND	NONE	GRANTS FOR RELIGIOUS. MEDICAL OR EDUCATIONAL	5,000
3545 JEROME AVENUE	PC	PURPOSES	3,000
	r	FURFOSES	
BRONA, NY 10467			
THE GREATER NEW OPLEANS FOUNDATION FOR EPNO	NONE	GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL	2,500
1055 ST CHAPLIES AVENUE, SUITE 100	PC	PURPOSES	
NEW ORLEANS, LA 70130			
BURKE UNITED CHRISTIAN MINISTRIES	NONE	GRANTS FOR RELIGIOUS, MEDICAL OF EDUCATIONAL	1,000
305-B WEST UNION STREET	PC	PURPOSES	

MORGANTON, NC 28655

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FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 4 (CONT'D)

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

RECIPIENT NAME AND ADDRESS

FOUNDATION STATUS OF RECIPIENT

PUPPOSE OF GRANT OF CONTRIBUTION

AMOUNT

OPT'ONS, INC

NONE

GRANTS FOR RELIGIOUS, MEDICAL OR EDUCATIONAL

1,000

MORCANTON, NC 28686-2512

P O BOX 2512

TOTAL CONTRIBUTIONS PAID

419, 141

ATTACHMENT 4

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